



REQUEST TO CANCEL REGISTRATION

VOID Number
Name of Registered Voter
Residence Address
Mailing Address (if different from residence address)
Date of Birth

X

Signature

Date

Upon completion of this form, you may:

- Deliver the form in person to the Travis County Tax Office, Voter Registration Division, at 2433 Ridgepoint Drive, Monday – Friday, 8:00 AM – 5:00 PM, or
- Mail the form to PO Box 149327, Austin, TX 78767-9327
- Email request to Tax_voters@traviscountytex.gov

If you have any questions, please contact our office at (512) 854-9473.